

COMBINED DECLARATION AND POWER OF ATTORNEY(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL,
DIVISIONAL, CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATIONThis declaration is of the following type: *(check one)*

- | | |
|--|---|
| <input checked="" type="checkbox"/> Original | <input type="checkbox"/> National Stage PCT |
| <input type="checkbox"/> Supplemental | <input type="checkbox"/> Divisional |
| <input type="checkbox"/> Design | <input type="checkbox"/> Continuation |
| | <input type="checkbox"/> Continuation-in-Part (CIP) |

INVENTORSHIP IDENTIFICATION

NOTE: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

UBIQUINONE COMPOSITION AND METHODS RELATED THERETOthe specification of which: *(complete (a), (b) or (c))*

- (a) ☒ is attached hereto.
- (b) ☐ was filed on _____ as
☐ Serial No. 08/_____ or
☐ Express Mail No. _____, as Serial No. not yet known
and was amended on _____. *(If applicable)*
- (c) ☐ was described and claimed in PCT International Application No. PCT/
filed on _____ and as amended under PCT Article 19 on _____. *(If any)*

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above, and that the filing of said specification, if heretofore filed, was authorized by me.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

CLAIM OF PRIORITY OF EARLIER FOREIGN APPLICATION(S) UNDER 35 U.S.C. §119(a)-(d)

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

(List prior foreign/PCT application(s) filed within 12 months (6 months for design) prior to this U.S. application.)

NOTE: Where item (c) is entered above and the International Application which designated the U.S. claimed priority check item (e), enter the details below and make the priority claim.

| COUNTRY (orPCT) | APPLICATION NO. | DATE OF FILING (Day/Month/Year) | PRIORITY CLAIMED UNDER 35 USC §119 |
|--------------------|-----------------|------------------------------------|--|
| | | | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| | | | <input type="checkbox"/> YES <input type="checkbox"/> NO |

CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S) UNDER 35 U.S.C. §119(e)

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below:

(List prior U.S. provisional applications.)

| PROVISIONAL APPLICATION NO. | FILING DATE (Day/Month/Year) |
|-----------------------------|---------------------------------|
| | |
| | |

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S) UNDER 35 U.S.C. 120

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in such prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

(List prior U.S. applications or PCT international applications designating the U.S. for benefit under 35 U.S.C. §120.)

U.S. APPLICATIONS

STATUS (Check One)

| U.S. SERIAL NO. | U.S. FILING DATE (Day/Month/Year) | Patented | Pending | Abandoned |
|-----------------|--------------------------------------|--------------------------|--------------------------|--------------------------|
| 0 / | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 0 / | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

PCT APPLICATIONS DESIGNATING THE U.S.

STATUS (Check One)

| PCT APPLN. NO. | PCT FILING DATE (Day/Month/Year) | U.S. SERIAL NOS ASSIGNED (If any) | Patented | Pending | Abandoned |
|----------------|-------------------------------------|--------------------------------------|--------------------------|--------------------------|--------------------------|
| PCT/ | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| PCT/ | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

35 USC 119 PRIORITY CLAIM, IF ANY, FOR ABOVE LISTED U.S./PCT APPLICATIONS

| PRIORITY APPLICATION NO. | PRIORITY COUNTRY | FILING DATE (Day/Month/Year) | ISSUE DATE (Day/Month/Year) |
|-----------------------------|---------------------|---------------------------------|--------------------------------|
| | | | |
| | | | |
| | | | |

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office in connection therewith:

Charles R. Hoffmann, Reg. No. 24,102; Ronald J. Baron, Reg. No. 29,281; Gerald T. Bodner, Reg. No. 30,449; Alan M. Sack, Reg. No. 31,874; A. Thomas Kammer, Reg. No. 28,226; R. Glenn Schroeder, Reg. No. 34,720; Glenn T. Henneberger, Reg. No. 36,074; Irving N. Feit, Reg. No. 28,601; Anthony E. Bennett, Reg. No. 40,910; Gregory W. Bachmann, Reg. No. 41,593; Steven T. Zuschlag, Reg. No. 43,309; Susan A. Sipos, Reg. No. 43,128; Kevin E. McDermott, Reg. No. 35,946; Robert C. Morriss, Reg. No. 42,910; Rod S. Turner, Reg. No. 38,639; James F. Harrington, Reg. No. 44,741; Algis Anilionis, Reg. No. 36,995; Justin K. Holmes, Reg. No. 42,666; and Joseph J. Catanzaro, Reg. No. 25,837, each of them of HOFFMANN & BARON, LLP, 6900 Jericho Turnpike, Syosset, New York 11791; and Daniel A. Scola, Jr., Reg. No. 29,855; Salvatore J. Abbruzzese, Reg. No. 30,152; Kellyanne Merkel, Reg. No. 43,800; Keith R. Lange, Reg. No. 44,201; John Sopko, Reg. No. 41,321; Barry Jacobsen, Reg. No. 43,689; Gloria K. Szakiel, Reg. No. 45,149; and Mark E. Baron, Reg. No. 46,150, each of them of HOFFMANN & BARON, LLP, 1055 Parsippany Boulevard, Parsippany, New Jersey 07054.

PLEASE SEND CORRESPONDENCE TO:

Ronald J. Baron, Esq.
HOFFMANN & BARON, LLP
6900 Jericho Turnpike
Syosset, NY 11791

PLEASE DIRECT TELEPHONE CALLS TO:

James F. Harrington
(516) 822-3550

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Full Name of Sole or First Inventor: Dilip Chokshi

Country of Citizenship: U.S.A.

Residence Address: 9 Patrician Court, Parsippany, NJ 07054

Post Office Address: Same as above

Date: 1/8/01

Inventor's signature

Dilip S. Chokshi

NOTE: All above spaces identifying inventors must be completed or deleted before any inventor executes this application

Attorney's Docket No. 1114-2Applicant or Patentee: Dilip ChokshiSerial or Patent No.: UnassignedFiled or Issued: HerewithFor: Ubiquinone Composition and Methods Related Thereto

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY
STATUS (37 CFR 1.9(f) and 1.27(c))--SMALL BUSINESS CONCERN**

I hereby declare that I am

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act on behalf of the
concern identified below:

NAME OF CONCERN Pharmachem Laboratories, Inc.ADDRESS OF CONCERN 265 Harrison Avenue, Kearny, New Jersey 07032

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third-party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed, to and remain with the small business concern identified above with regard to the invention, entitled:

UBIQUINONE COMPOSITION AND METHODS RELATED THERETO

by inventor Dilip Chokshi

described in:

- ☐ the specification filed herewith.
☒ application identified above.
☐ patent no. _____, issued _____.

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights in the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 35 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27).

NAME Pharmachem Laboratories, Inc.
ADDRESS 265 Harrison Avenue Kearny, NJ USA 07032

☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

NAME NA
ADDRESS _____

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small business entity is no longer appropriate. (37 CFR 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING Andrea Bauer

TITLE OF PERSON OTHER THAN OWNER Comptroller

ADDRESS OF PERSON SIGNING Pharmachem Laboratories, Inc., 265 Harrison Avenue, Kearny, New Jersey 07032

SIGNATURE Andrea Bauer Date 01-08-01
125590_1.DOC

RECORDATION FORM COVER SHEET

U.S. DEPARTMENT OF COMMERCE

Patent and Trademark Office

PATENTS ONLY

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To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):
Dilip Chokshi

Additional names(s) of conveying party(ies) ☐ Yes ☒ No

3. Nature of conveyance:

- ☒ Assignment ☐ Merger
☐ Security Agreement ☐ Change of Name
☐ Other _____

Execution Date: 1/8 /01

2. Name and address of receiving party(ies):

Name: Pharmachem Laboratories, Inc.

Internal Address: _____

Street Address: 265 Harrison AvenueCity: Kearney State: NJ ZIP: 07032Additional name(s) & address(es) attached? ☐ Yes ☒ No

JC825 U.S. PTO
09/757222
01/09/01

4. Application number(s) or registration numbers(s):

If this document is being filed together with a new application, the execution date of the application is: 1/8 /01

A. Patent Application No.(s)

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Ronald J. Baron, Esq.Internal Address: Hoffmann & Baron, LLPStreet Address: 6900 Jericho TurnpikeCity: Syosset State: NY ZIP: 117916. Total number of applications and patents involved: 17. Total fee (37 CFR 3.41):.....\$ 40.00

- ☒ Enclosed - Any excess or insufficiency should be credited or debited to deposit account
☐ Authorized to be charged to deposit account

8. Deposit account number:

08-2461

DO NOT USE THIS SPACE

9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

James F. Harrington

Name of Person Signing

Signature

4

Date

Total number of pages including cover sheet, attachments, and document: